

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
C.I.P.E. CLASSIFIER		45	2/1/01
FORMALITY REVIEW	BE	897	02-04-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elect.
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	9/15/01
2	10/12/01
3	10/12/01
4	10/12/01
5	10/12/01
6	10/12/01
7	10/12/01
8	10/12/01
9	10/12/01
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13	10/12/01
14	10/12/01
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42	10/12/01
43	10/12/01
44	10/12/01
45	10/12/01
46	10/12/01
47	10/12/01
48	10/12/01
49	10/12/01
50	10/12/01

Claim	Date
Final	
Original	
51	10/12/01
52	10/12/01
53	10/12/01
54	10/12/01
55	10/12/01
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94	10/12/01
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96	10/12/01
97	10/12/01
98	10/12/01
99	10/12/01
100	10/12/01

Claim	Date
Final	
Original	
101	10/12/01
102	10/12/01
103	10/12/01
104	10/12/01
105	10/12/01
106	10/12/01
107	10/12/01
108	10/12/01
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146	10/12/01
147	10/12/01
148	10/12/01
149	10/12/01
150	10/12/01

If more than 150 claims or 10 actions
staple additional sheet here